

**DATE: January 16, 2004**



EV333998485US

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**EXPRESS MAIL CERTIFICATION**

Date of Deposit: **01/16/2004** I hereby certify that the below-listed papers or fees were inserted into a package addressed to: Commissioner for Patents, PO BOX 1450, Alexandria, Virginia 22313-1450 and was deposited by me with the United States Postal Service "Express Mail Post Office Addressee" service under 37 C.F.R. § 1.10 on the date indicated above.

Signature Mike Dakan

Date 1/16/04

Atty. Docket No.	Serial Number	Description	Atty.	Fee
AGIL-147	09/894,204	Transmittal, Restriction Election	JSK/ BEF	
AGIL-085	10/407,080	IDS, SB08A, Copies of (34) Cited References	BEF	
CLON-081	10/176,955	PTOL-85B <i>in duplicate</i>	BEF	\$1,630
VITA-002CIP2	10/663,538	Transmittal, Fee Transmittal <i>in duplicate</i> , Preliminary Amendment, IDS, Copies of 1449 & PTO-894's from Parent, Copy of Notice to File Missing Parts, Executed Declaration, Formal Drawing Transmittal, (87) Sheets of Formal Drawings	JSK	\$65
RIGL-004CON4	09/919,635	Request for RCE Transmittal, Fee Transmittal <i>in duplicate</i> , Petition for a 2 Month Extension of Time, Copy of Amendment as Filed 12/17/03	PJS	\$805
RIGL-012	10/142,662	Restriction Election/Preliminary Amendment	JSK	



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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 805)

## Complete if Known

Application Number	09/919,635
Filing Date	July 31, 2001
First Named Inventor	NOLAN, GARRY P.
Examiner Name	WESSENDORF, TERESA D.
Art Unit	1639
Attorney Docket No.	RIGL-004CON4

## METHOD OF PAYMENT (check all that apply)

 Check     Credit Card     Money Order     Other     None Order
 Deposit Account:

Deposit Account Number	50-0815
Deposit Account Name	Bozicevic, Field & Francis LLP

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below     Credit any overpayments Charge any additional fee(s) during the pendency of this application. Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

## Large Entity    Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge – late filing fee or oath
1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet
1053	130	1053	130	Non-English specification
1812	2,520	1812	2,520	For filing a request for ex parte reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examination action
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1,480	2254	740	Extension for reply within fourth month
1255	2,010	2255	1,005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive – unavoidable
1453	1,330	2453	665	Petition to revive – unintentional
1501	1,330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1406	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Fee Paid

420 (55 prev. paid)

## SUBTOTAL (1)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

## Fee from below

## Extra Claims    Fee Paid

Total Claims -20\*\* = x =

Indep. -3\*\* = x =

Multiple Dependent =

Large Entity    Small Entity

## Fee Description

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

## SUBTOTAL (2) \$

\*\*or number previously paid, if greater; For Reissues, see above.

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

## SUBTOTAL (3) (\$)

805

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Pamela J. Sherwood	Registration No. (Attorney/Agent)	36,877	Telephone	(650) 833-7790
Signature	Pamela J. Sherwood			Date	01/16/2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450